



CITY OF ELKO PLANNING DEPARTMENT

1751 College Avenue * Elko * Nevada * 89801

(775) 777-7160 * (775) 777-7219 fax

APPLICATION TO WAIVE CURB, GUTTER AND SIDEWALK INSTALLATION

APPLICANT(s): _____
MAILING ADDRESS: _____
PHONE NO. (Home) _____ (Business) _____
NAME OF PROPERTY OWNER (If different): _____
(Property owner consent in writing must be provided.)
MAILING ADDRESS: _____
ADDRESS AND LOCATION OF PROPERTY INVOLVED (Attach if necessary):

ASSESSOR PARCEL NO(S): _____

FILING REQUIREMENTS:

Complete Application Form: In order to begin processing the application, an application form must be complete and signed. *Complete* applications are due at least two weeks before any City Council meeting.

Fee: A \$250.00 non-refundable filing fee.

Plot Plan: A plot plan provided by a properly licensed surveyor depicting the existing condition drawn to scale showing property lines, existing and proposed buildings, building setbacks, distances between buildings, parking and loading areas, driveways and other pertinent information.

Note: One .pdf (email is okay) of the entire application must be submitted, as well as one set of legible, reproducible plans 8 ½" x 11" in size.

Other Information: The applicant is encouraged to submit other information and documentation to support the request.

1. APPLICANT requests a waiver of the requirement to install curb, gutter and sidewalk as described below:

2. Identify any special circumstances, features or conditions applying to the property or the surrounding area which warrant or justify the waiver (evidence that it is technically impractical to install curb, gutter and sidewalk because of circumstances beyond the reasonable control of the applicant):

3. Indicate how the granting of the waiver will not result in prejudice to other properties in the vicinity nor be detrimental to the public health, safety, and general welfare.

This area intentionally left blank,

By My Signature below:

I consent to having the City of Elko Staff enter on my property only for the sole purpose of inspection said property as part of this application process.

I object to having the City of Elko Staff enter onto my property as a part of their review of this application. (Your objection will not affect the recommendation made by the staff or the final determination made by the City Planning Commission or the City Council.)

I acknowledge that submission of this application does not imply approval of this request by the City Planning Department or the City Council, nor does it in and of itself guarantee issuance of any other required permits and/or licenses.

I acknowledge that this application may be tabled until a later meeting if either I or my designated representative or agent is not present at the meeting for which this application is scheduled.

I have carefully read and completed all questions contained within this application to the best of my ability.

Applicant / Agent _____
(Please print or type)

Mailing Address _____
Street Address or P.O. Box

City, State, Zip Code

Phone Number: _____

Email address: _____

SIGNATURE: _____

OFFICE USE ONLY

File No.: _____ **Date Filed:** _____ **Fee Paid:** _____
